Fishers Department of Fire and Emergency Services

We*Care*: A Community Paramedicine Program

Fishers **We***Care*
Community Paramedicine

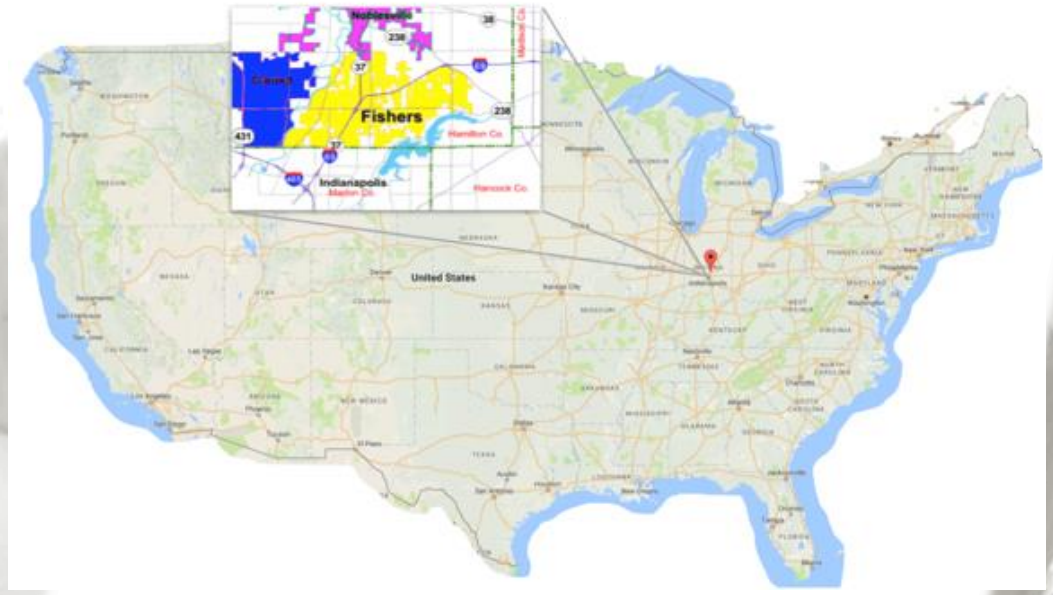
Joshua M. Mehling

Lieutenant

Fishers Fire Department
(Fishers, Indiana, USA)

Engine 393 C-shift Officer,
EMS Duty Officer, and
WeCare Coordinator

Fishers WeCare
Community Paramedicine



58 Square Miles

Population: 87,887

Fishers **We***Care*
Community Paramedicine

Overview

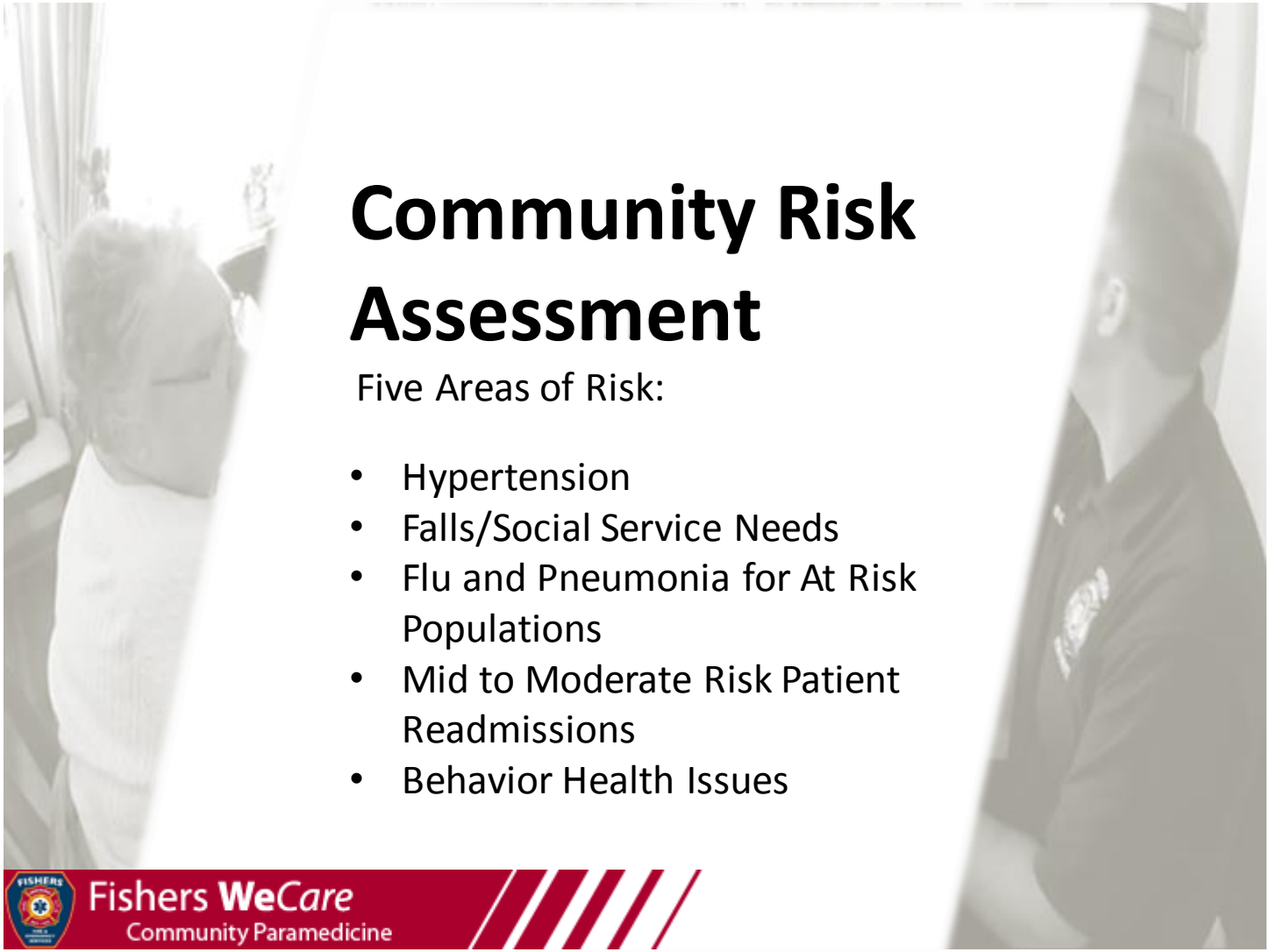
- Community Risk Assessment
- Coalition Building
- Program Development
- Implementation of Program
- Data Collection and Analysis
- Reassessing Community Risk

Community Risk Assessment

Fishers WeCare
Community Paramedicine

Community Risk Assessment

- Centers for Medicare & Medicaid Services (CMS)
  - 30 day readmission penalties
- High Volume Calls
- Mortality and Morbidity in the City of Fishers
  - Indiana State Department of Health: Epidemiology Resource Center (ERC)



Community Risk Assessment

Five Areas of Risk:

- Hypertension
- Falls/Social Service Needs
- Flu and Pneumonia for At Risk Populations
- Mid to Moderate Risk Patient Readmissions
- Behavior Health Issues

Coalition Building

Fishers WeCare
Community Paramedicine

Coalition Building

HealthCall®

Community Health Network

Aspire

Good Samaritan Network

LOCAL 4416 IAFF EST. 2005 AFL-CIO CLC HAMILTON COUNTY

PHHC Partnership For A Healthy Hamilton County

WhatFriendsDo

CICOA Aging & In-Home Solutions

A member of the INconnect Alliance.

Community Health Network

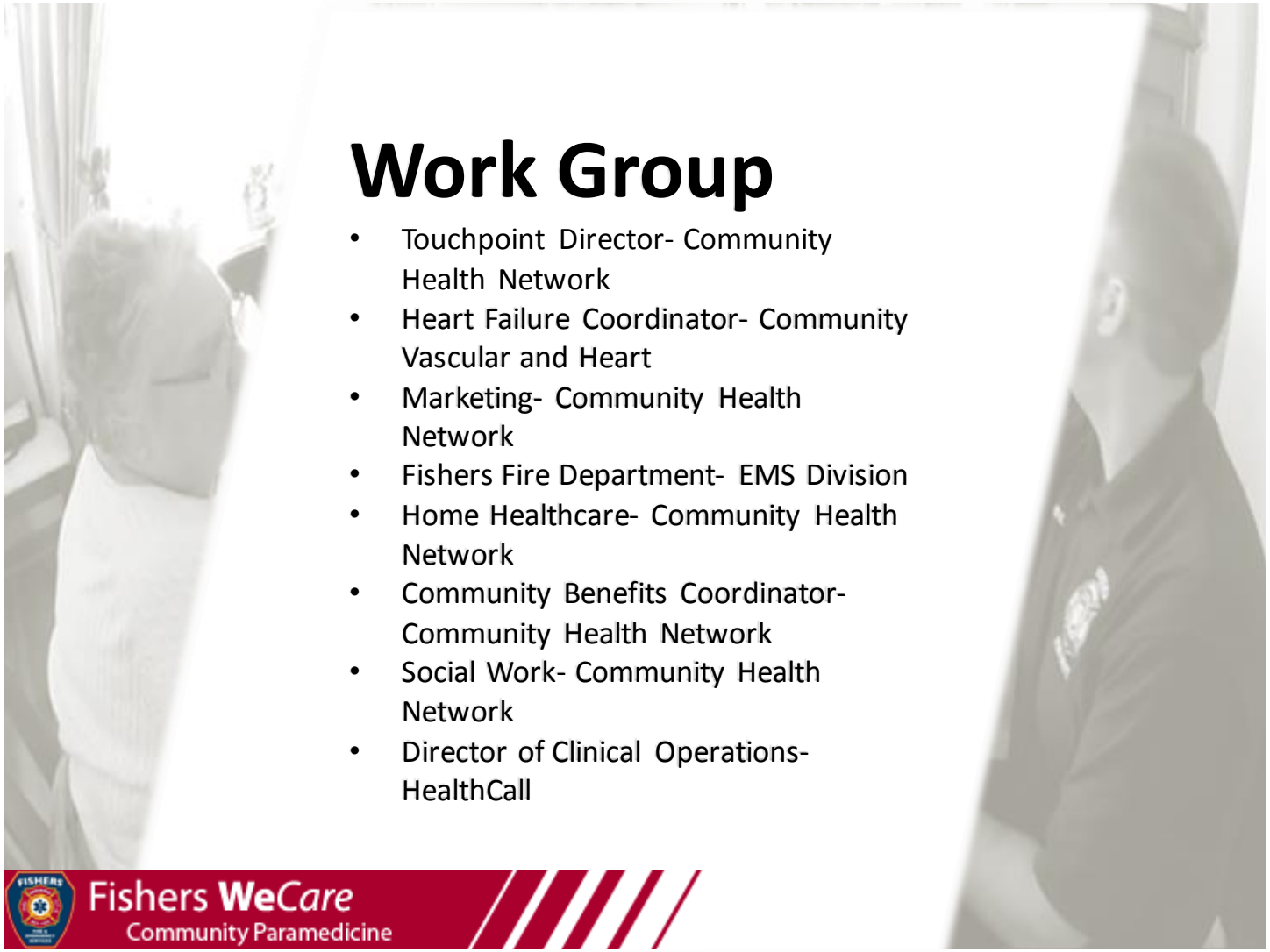
- Large multi-service health system in Metro Indianapolis
  - Community North
  - Heart and Vascular
  - Home Health
  - Behavior Health

Program Development

Fishers WeCare
Community Paramedicine

Program Development

- Work Group
- Evidence Based Medicine
- Seamless Transition from Hospital to Home

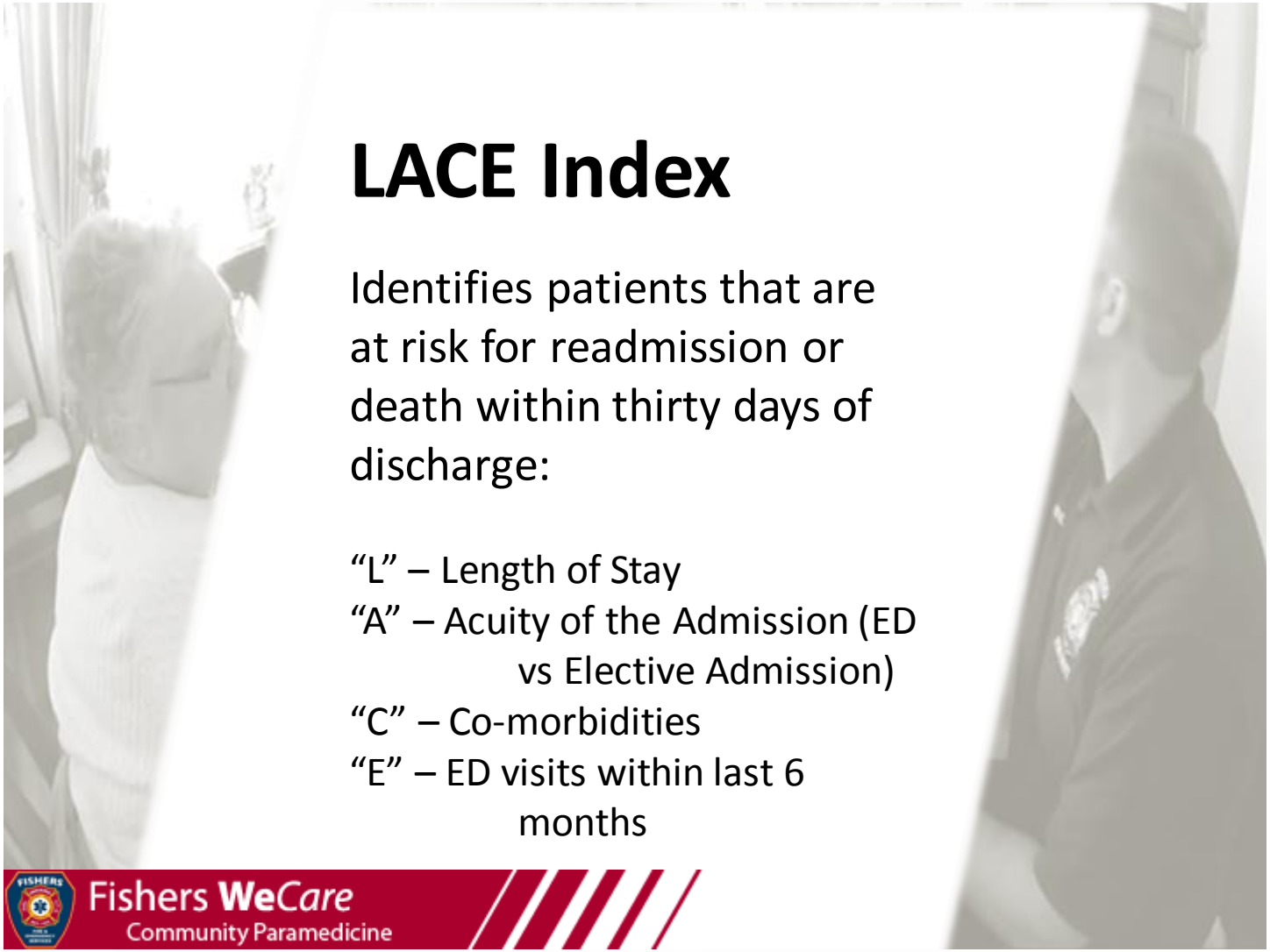


Work Group

- Touchpoint Director- Community Health Network
- Heart Failure Coordinator- Community Vascular and Heart
- Marketing- Community Health Network
- Fishers Fire Department- EMS Division
- Home Healthcare- Community Health Network
- Community Benefits Coordinator- Community Health Network
- Social Work- Community Health Network
- Director of Clinical Operations- HealthCall

Evidence Based Medicine

- LACE – Systematic Approach to Identify Patients at Risk for Readmission
  - https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4670852/
- Teach Back Method
  - https://www.ncbi.nlm.nih.gov/pubmed/22580624
- Zones Education
  - Based on recommendations from: Lewis, S.L., Heitkemper, M. M., Dirksen, S.R., O'Brien, P. G., & Bucher, L. (2007). Medical-surgical nursing. Assessment and Management of Clinical Problems. Mosby: China



LACE Index

Identifies patients that are at risk for readmission or death within thirty days of discharge:

"L" – Length of Stay
"A" – Acuity of the Admission (ED vs Elective Admission)
"C" – Co-morbidities
"E" – ED visits within last 6 months

LACE Index

0 – 4 = LOW
5 – 9 = Moderate
≥ 10 = High risk of readmission

LACE Index

LACE Index Scoring Tool for Risk Assessment of Hospital Readmission

Step 1. Length of Stay
Length of stay (including day of admission and discharge): _____days

Length of stay (days)	Score (circle as appropriate)
1	1
2	2
3	3
4-6	4
7-13	5
14 or more	7

→ L

Step 2. Acuity of Admission
Was the patient admitted to hospital via the emergency department?
If yes, enter "3" in Box A, otherwise enter "0" in Box A

A

Step 3. Comorbidities

Condition (definitions and notes on reverse)	Score (circle as appropriate)
Previous myocardial infarction	+1
Cerebrovascular disease	+1
Peripheral vascular disease	+1
Diabetes without complications	+1
Congestive heart failure	+2
Diabetes with end organ damage	+2
Chronic pulmonary disease	+2
Mild liver or renal disease	+2
Any tumor (including lymphoma or leukemia)	+2
Dementia	+3
Connective tissue disease	+3
AIDS	+4
Moderate or severe liver or renal disease	+4
Metastatic solid tumor	+6
TOTAL	

If the TOTAL score is between 0 and 3 enter the score into Box C. If the score is 4 or higher, enter 5 into Box C

C

Step 4. Emergency department visits
How many times has the patient visited an emergency department in the six months prior to admission (not including the emergency department visit immediately preceding the current admission)? _____
Enter this number or 4 (whichever is smaller) in Box E

E

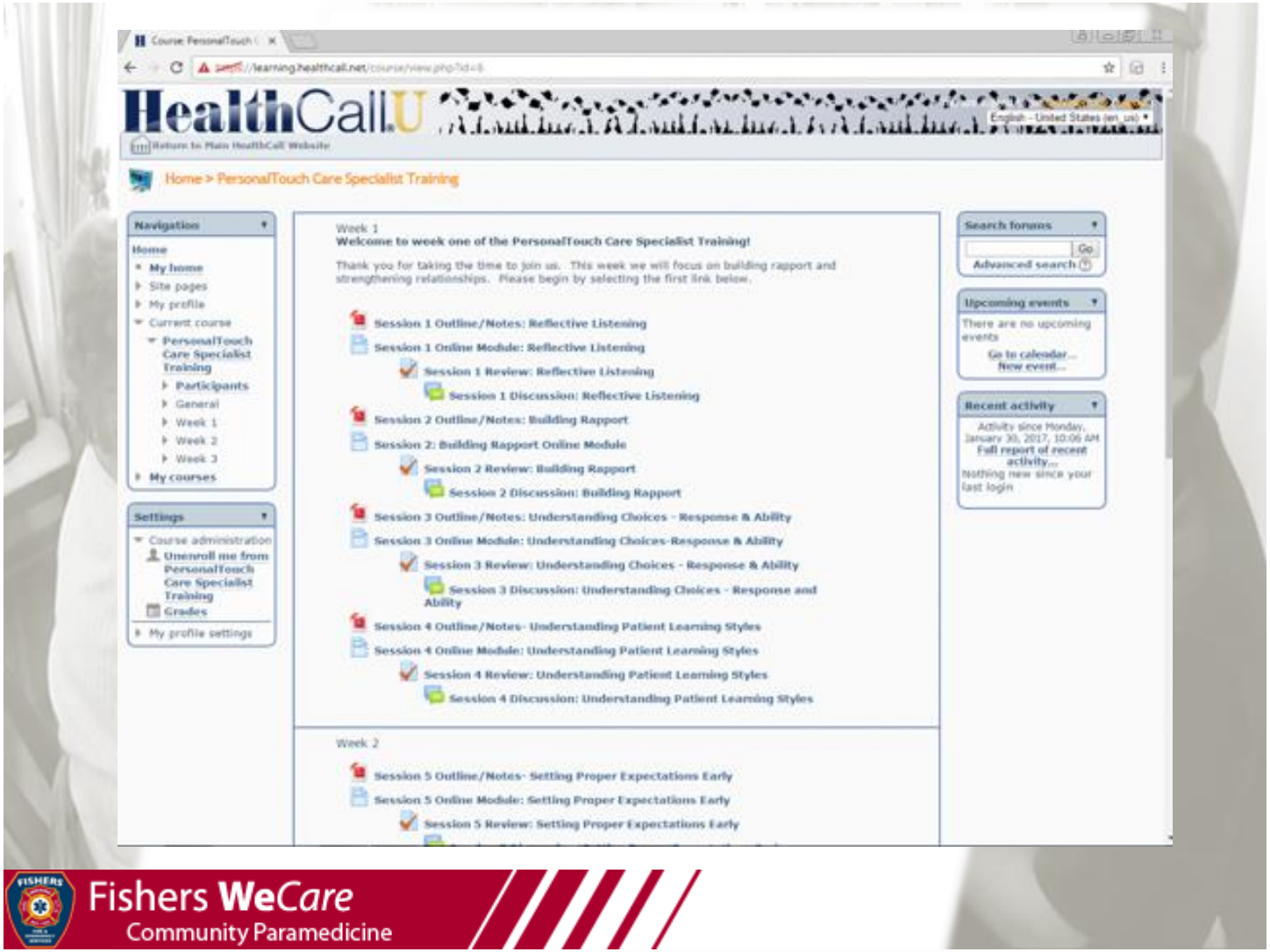
Add numbers in Box L, Box A, Box C, Box E to generate LACE score and enter into box below.

LACE

LACE Score Risk of Readmission: ≥ 10 High Risk

BESLER CONSULTING

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4670852/



Fishers WeCare
Community Paramedicine

Community Health Network

HEART FAILURE ZONES

Know your zone: Green, Yellow, or Red

Every Day:

- Weigh yourself in the morning after you empty your bladder, before breakfast. Write it down and compare to yesterday's weight.
- Take your medication as prescribed.
- Check for swelling in your feet, ankles, legs and stomach
- Eat low salt food—no more than 2000mg of sodium daily
- Balance activity and rest periods
- Drink 1.5-2 liters of liquids daily (8 cups) or the amount your doctor tells you to drink

Green Zone: All Clear

- No shortness of breath during the day or night
- No swelling
- No weight gain
- No chest pain

Green Zone Means: DOING WELL

- Your symptoms are under control
- Continue daily weights
- Continue taking your medications as prescribed
- Follow low salt diet—2000mg
- Keep all doctor appointments.

Yellow Zone: Caution

- Weight loss of 5 pounds
- Weight gain of 2 pounds in 1 day or a gain of 5 pounds in 1 week
- Worsening lightheadedness, more tired, no energy, confusion
- Increased swelling of feet, ankles, legs, or stomach
- Increased shortness of breath—with activity or lying down
- Increase in the number of pillows needed or you need to sleep sitting up in a chair

Yellow Zone Means: Warning

- You may need an adjustment in your medications
- Call your doctor to discuss your symptoms
  Doctor:_____
  Number:_____
- Call your Home Care Nurse 24 hour number:_____
- Please tell your home care nurse if you call or see your doctor

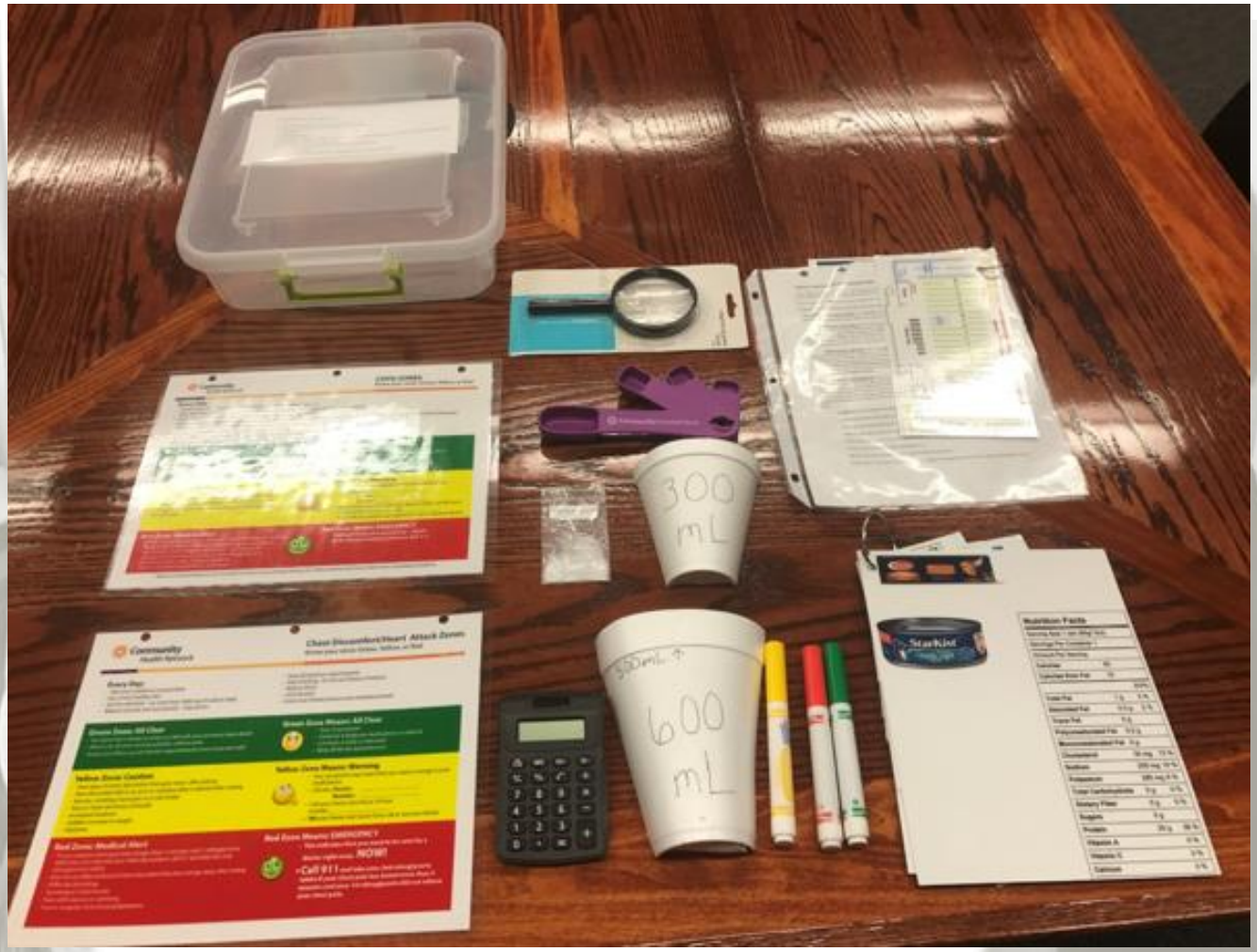
Red Zone: Medical Alert

- Chest pain
- Fainting
- Struggling to breathe—does not go away at rest
- Need to sit up in a chair to breathe
- Confusion—cannot think clearly

Red Zone Means: EMERGENCY

- **You need to be seen by a doctor – NOW! TAKE ACTION!**
- **Call 911**
- **Call your doctor (only if someone else can to do this)**

Based on recommendations from: Lewis, S.L., Heitkemper, M.M., Dirksen, S.R., O'Brien, P.G., & Bucher, L. (2007). Medical-surgical nursing: Assessment and management of clinical problems. Mosby: China.



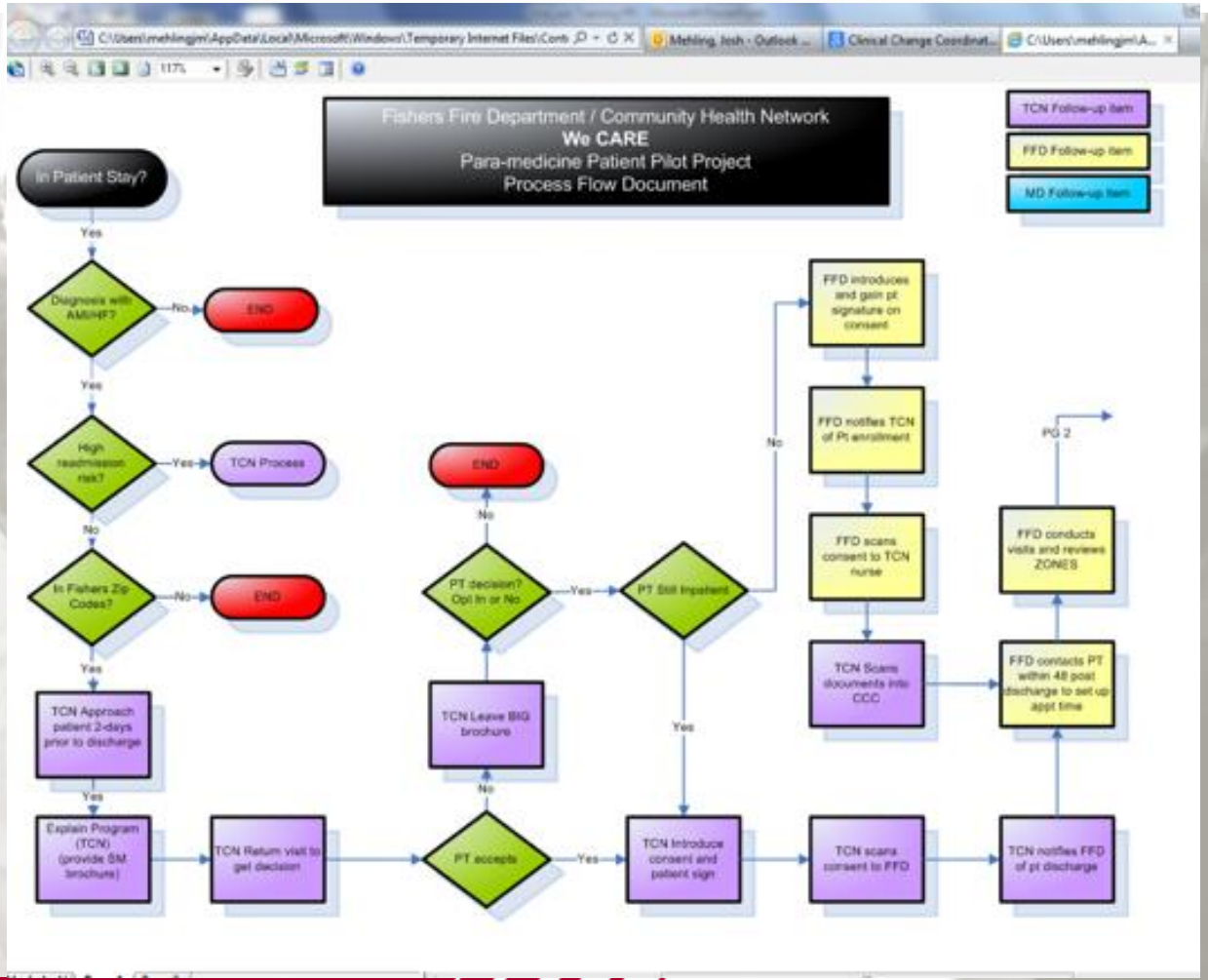
Fishers WeCare
Community Paramedicine

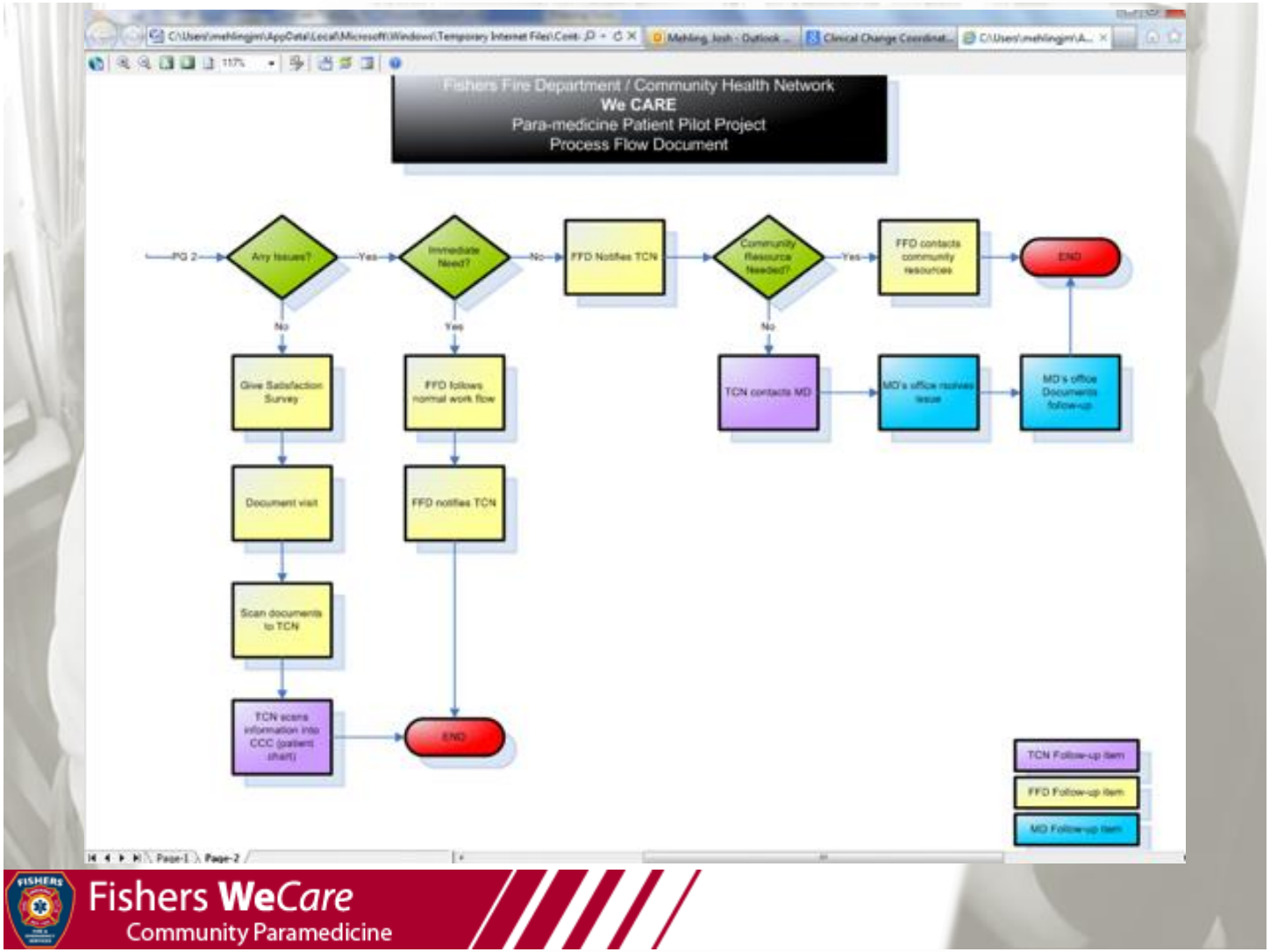
Implementation of Program

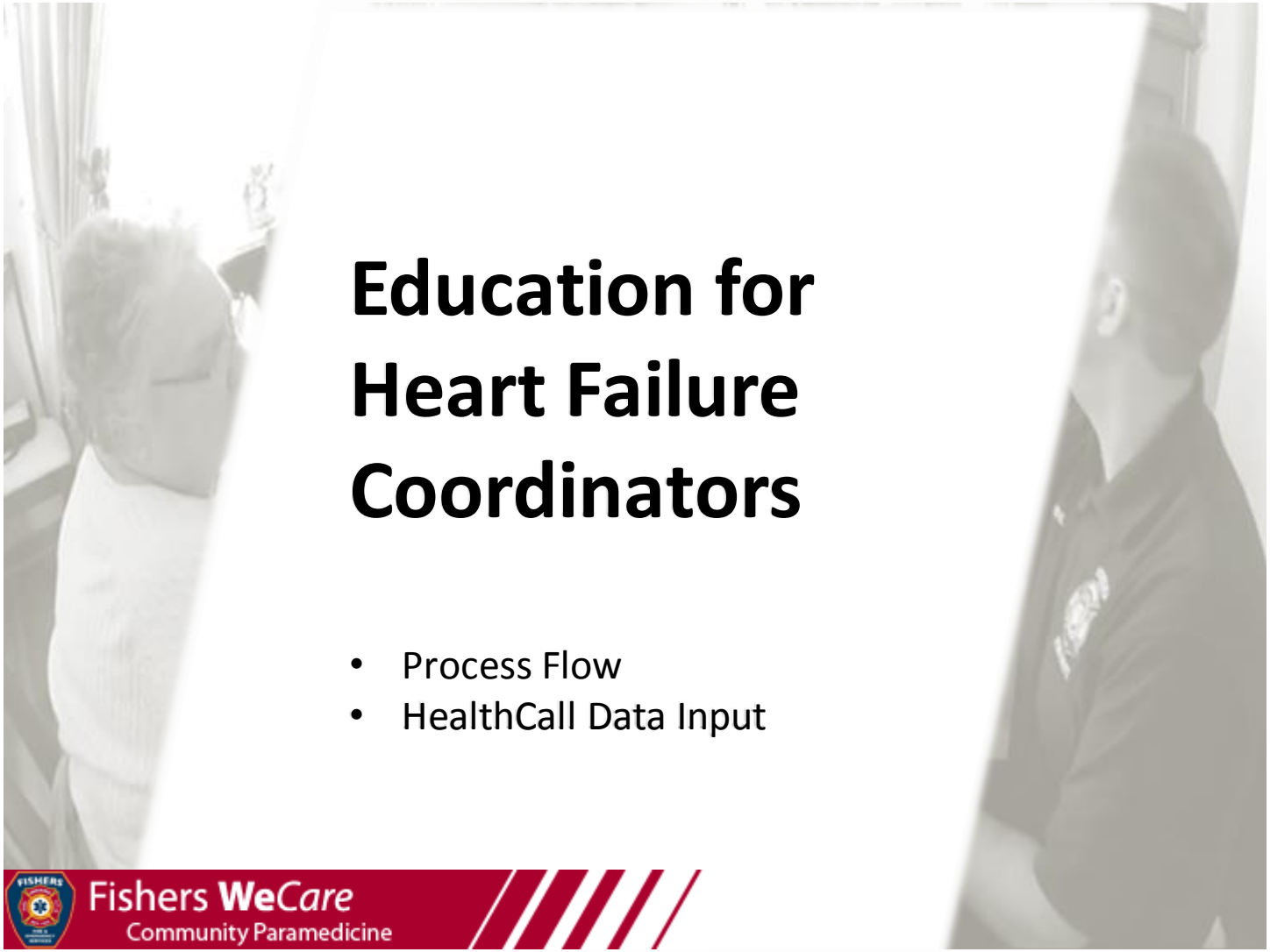
Fishers WeCare
Community Paramedicine

Implementation of Program

- Process Flow
- Education for Heart Failure Coordinators
- Education for Community Paramedics
- City of Fishers Ordinance


Fishers Fire Department / Community Health Network
We CARE
Para-medicine Patient Pilot Project
Process Flow Document
TCN Follow-up item
FFD Follow-up item
MD Follow-up item
In Patient Stay?
Yes
Diagnosis with AMI/HF?
No
END
Yes
High readmission risk?
Yes
TCN Process
No
In Fishers Zip Codes?
No
END
Yes
TCN Approach patient 2-days prior to discharge
Yes
Explain Program (TCN) (provide SM brochure)
TCN Return visit to get decision
END
No
PT decision? Opt In or No
Yes
PT Still Inpatient
No
FFD introduces and gain pt signature on consent
FFD notifies TCN of Pt enrollment
FFD scans consent to TCN nurse
TCN Scans documents into CCC
Yes
TCN Leave BIG brochure
No
PT accepts
Yes
TCN Introduce consent and patient sign
TCN scans consent to FFD
PG 2
FFD conducts visits and reviews ZONES
FFD contacts PT within 48 post discharge to set up appt time
TCN notifies FFD of pt discharge

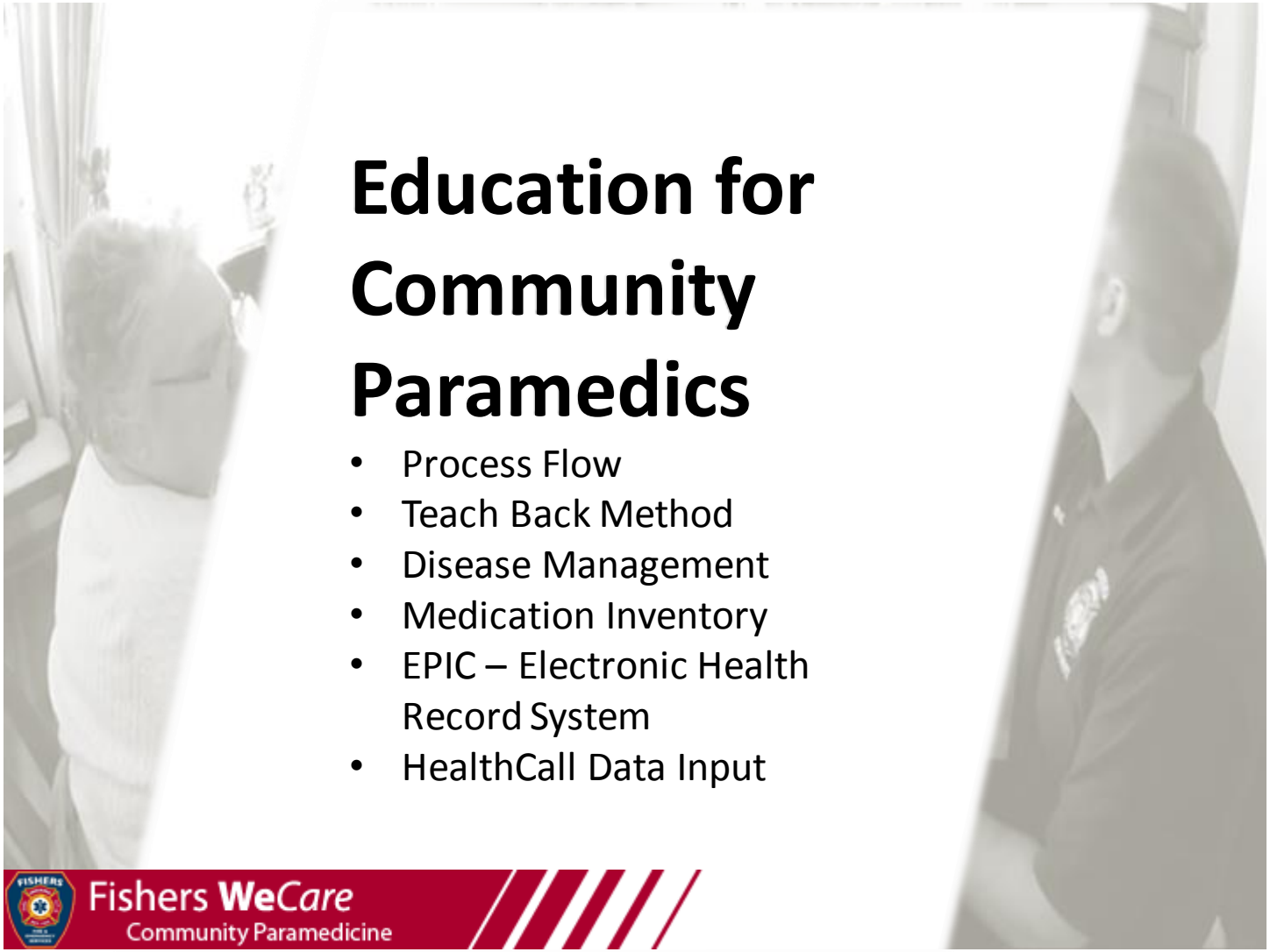

Fishers Fire Department / Community Health Network
We CARE
Para-medicine Patient Pilot Project
Process Flow Document
PG 2
Any Issues?
Yes
Immediate Need?
No
FFD Notifies TCN
Community Resource Needed?
Yes
FFD contacts community resources
END
No
Yes
No
Give Satisfaction Survey
FFD follows normal work flow
TCN contacts MD
MD's office resolves issue
MD's office Documents follow-up
Document visit
FFD notifies TCN
Scan documents to TCN
TCN scans information into CCC (patient chart)
END
TCN Follow-up Item
FFD Follow-up Item
MD Follow-up Item
Page-1
Page-2



Education for Heart Failure Coordinators

- Process Flow
- HealthCall Data Input

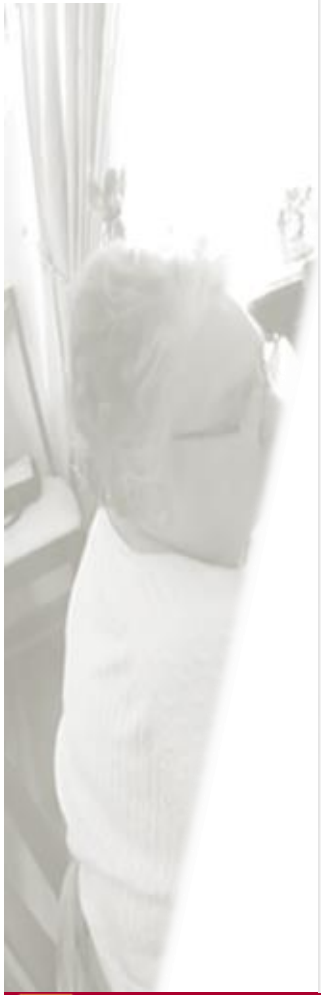
Fishers WeCare
Community Paramedicine



Education for Community Paramedics

- Process Flow
- Teach Back Method
- Disease Management
- Medication Inventory
- EPIC – Electronic Health Record System
- HealthCall Data Input

Fishers WeCare
Community Paramedicine



inComm Logon: _____ Item #: Skill Assess Fishers FD

COMMUNITY HEALTH NETWORK
COMPETENCY VERIFICATION CHECKLIST
Assessment Skills Check List

DATE: 1/20/15
VERIFIER: Sue Heinzman
NAME: Josh Melling
COST CENTER/UNIT: FISHERS FD
Attempt: (1) 2 3

Competency: The staff member will demonstrate proficiency in the Assessment and Education of the Patient with COPD that recently discharged from an acute care setting.

Behaviors: Demonstrates use of the COPD Zone, application, knowledge of Pulmonary Medications for the treatment of COPD as well as appropriate, competent, patient assessment skills.

Classification: Paramedic in the WeCare program

Steps:	RATING SCALE: MEETS	RATING SCALE: DOES NOT MEET
1. Demonstrates knowledge of the standardized education for the COPD Zone	✓	
2. Accurately defines the steps for patient education and symptom self - assessment.*	✓	
3. Describes the negative symptoms of COPD leading to exacerbation	✓	
4. Accurately re-demonstrates the appropriate assessment skills for patients experiencing COPD post-acute discharge..	✓	
5. Identifies how to contact the RN project coordinator	✓	
6. Describes why home medication assessments are so important	✓	
7. Identifies ways to promote medication adherence	✓	
8. Identifies when patients should call their doctor	✓	
9. Accurately demonstrates coaching techniques to support the COPD patient	✓	
10. Defines the Medication Reconciliation/Assessment Process*	✓	
TOTAL	100	
REQUIRED TO MEET	80%	

*Essential Elements

MEETS ☒ DOES NOT MEET ☐

Verifier Signature: [signature] MSRN ACNS-BC

Employee Signature: [signature]

Developed by: Sue Heinzman, MS, RN, ACNS-BC, Clinical Nurse Specialist
Date: 1/14/15
Place: Community Health Network – East Hospital

Fishers WeCare
Community Paramedicine

ORDINANCE NO. _____

AN ORDINANCE GOVERNING A COMMUNITY PARAMEDIC PROGRAM IN THE TOWN OF FISHERS, HAMILTON COUNTY, INDIANA

WHEREAS, the Town of Fishers Fire & Emergency Services Department ("Fire Department") employs more than one hundred twenty (140) trained firefighters, emergency medical technicians ("EMT") and paramedics;

WHEREAS, the Fire Department offers a variety of services within Fishers beyond fighting fires, including but not limited to providing emergency medical services, advanced life support and responding to non-emergency calls for service;

WHEREAS, Fishers' EMTs and paramedics are specially trained to conduct in-home patient assessments and provide limited, primary health care and preventive services pursuant to a physician's order;

WHEREAS, the Fire Department desires to improve the health and welfare of the Town of Fishers' ("Fishers") residents by establishing a Community Paramedic Program and entering into agreements with local hospitals to provide in-home, limited medical services to residents pursuant to a physician's order ("Community Paramedic Program");

WHEREAS, as part of the Community Paramedic Program, Fire Department EMTs and paramedics will help physicians monitor the health of vulnerable patients by, for example, monitoring cardiac rhythm and conducting fall assessments;

WHEREAS, the Community Paramedic Program targets frequent users of emergency-911 services and provides a proactive, holistic approach to health care by using available EMTs and paramedics to serve the resident's needs—social, medical and personal.

WHEREAS, the use of Community Paramedic Programs in other communities has led to a reduced number of expensive emergency runs and has saved communities money;

WHEREAS, utilizing current employees, Fishers Fire Department has the capacity to participate in a Community Paramedic Program;

WHEREAS, local hospitals have expressed a desire to participate in a Community Paramedic Program; and

WHEREAS, in an effort to better serve Fishers' residents and reduce the rate of emergency calls, the Fishers Fire Department desires to establish a Community Paramedic Program.

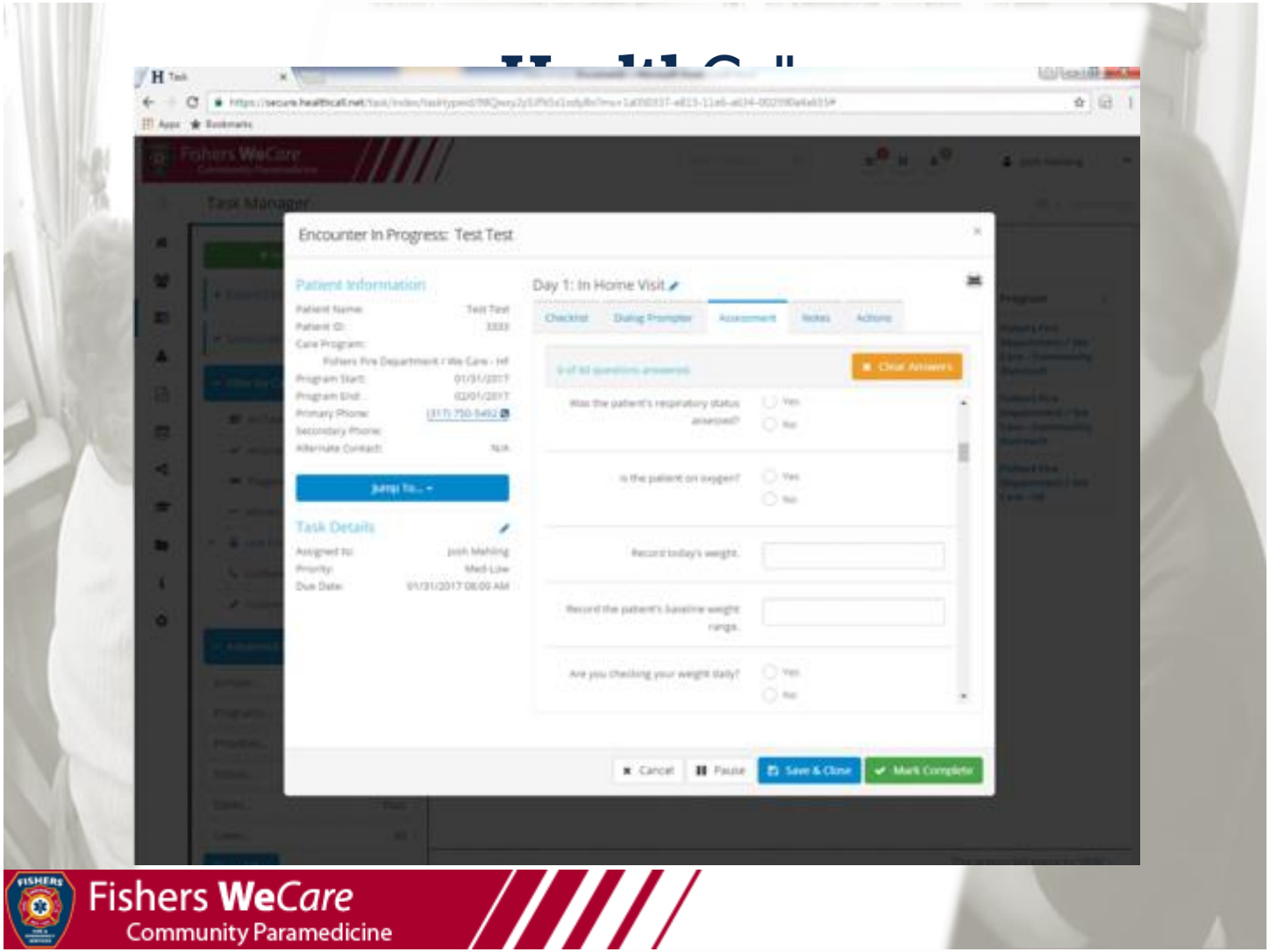
NOW, THEREFORE BE IT HEREBY ORDAINED BY THE TOWN COUNCIL OF THE TOWN OF FISHERS, HAMILTON COUNTY, INDIANA, THAT:

Data Collection and Analysis

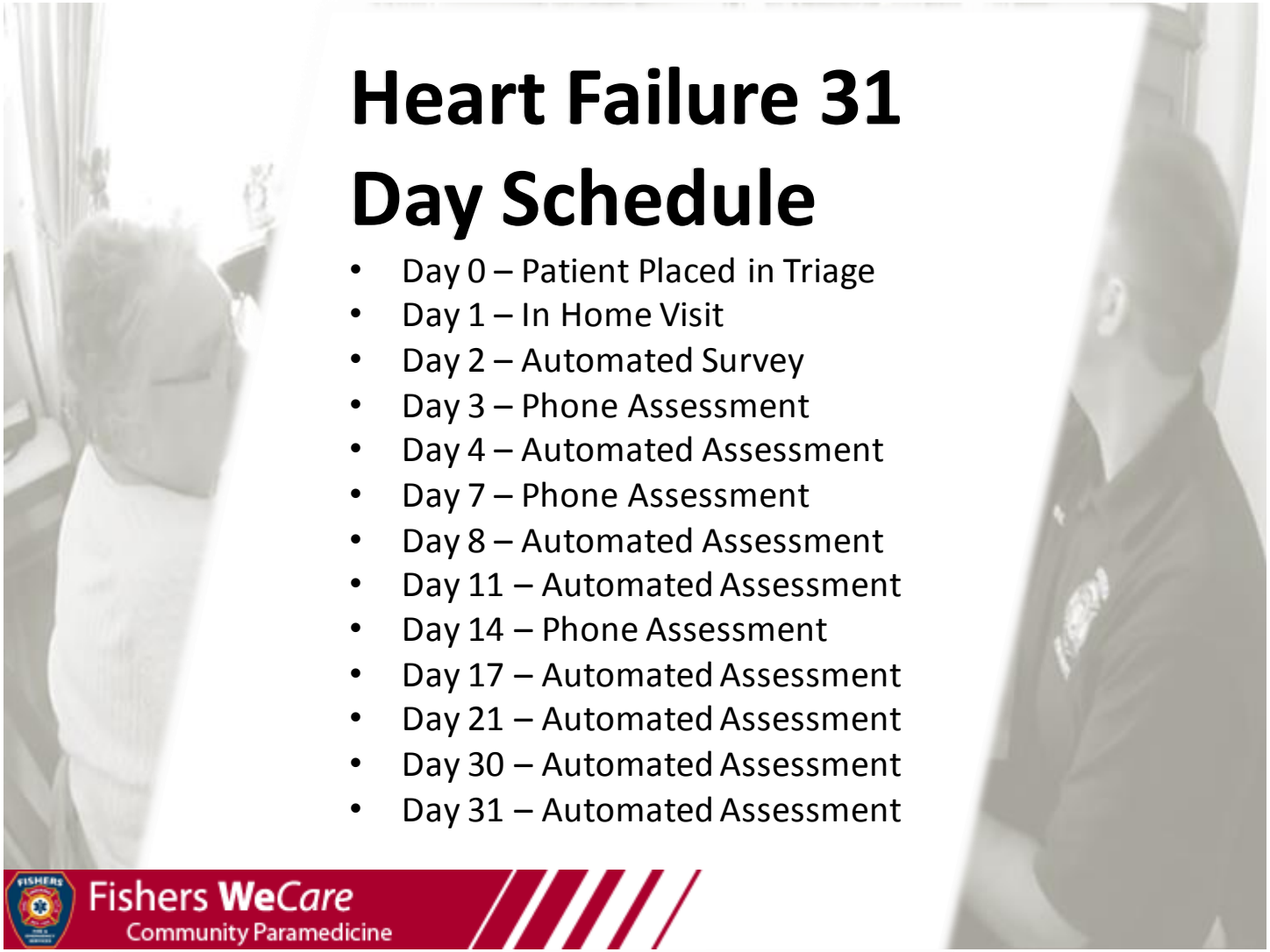
Fishers WeCare
Community Paramedicine

Data Collection System

- Track Patient Contacts over 31 days and beyond
- Assessment Data Collection and Analysis
- Easy to Use
- Assist in Managing Large Amount of Patients with Small Amount of Staff



Fishers WeCare
Community Paramedicine



Heart Failure 31 Day Schedule

- Day 0 – Patient Placed in Triage
- Day 1 – In Home Visit
- Day 2 – Automated Survey
- Day 3 – Phone Assessment
- Day 4 – Automated Assessment
- Day 7 – Phone Assessment
- Day 8 – Automated Assessment
- Day 11 – Automated Assessment
- Day 14 – Phone Assessment
- Day 17 – Automated Assessment
- Day 21 – Automated Assessment
- Day 30 – Automated Assessment
- Day 31 – Automated Assessment

Fishers WeCare
Community Paramedicine

PersonalTouch™
Outcome Measures

Fishers Fire Department
Report Date: 10/01/15 - 11/01/15

Readmissions

0%

17.5% National Avg.[1]

Lower percentage is better. Reflects 30-day aggregate readmission rate for the identified population.

Detail Trending - 6 Months

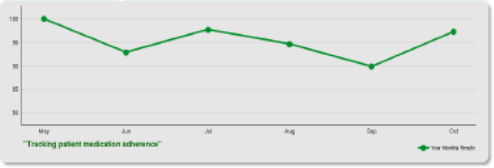
Adherence

97.3%

21% National Avg. [2,3]

Higher percentage is better. Adherence criteria may include: medication, treatment, and assessments.

Detail Trending - 6 Months



Wellbeing

7.38

Initial Avg: 6.48

Reflects improvement in overall patient wellbeing over initial baseline assessment.

Detail Trending - 6 Months

Encounters

78.6%

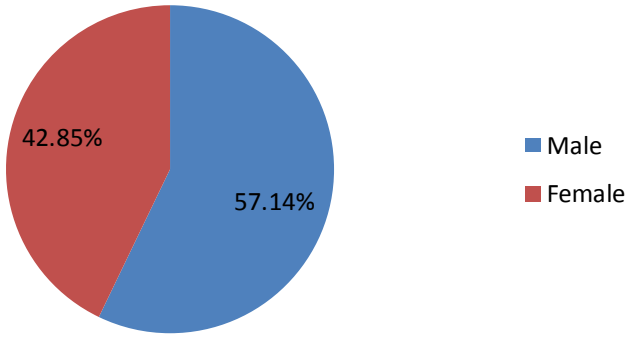
Reflects the percentage of live patient encounters actually completed on time as scheduled.

Detail Trending - 6 Months

HealthCall.com | info@healthcall.com | 866-944-5433 | 9800 Connecticut Drive Crown Point, Indiana

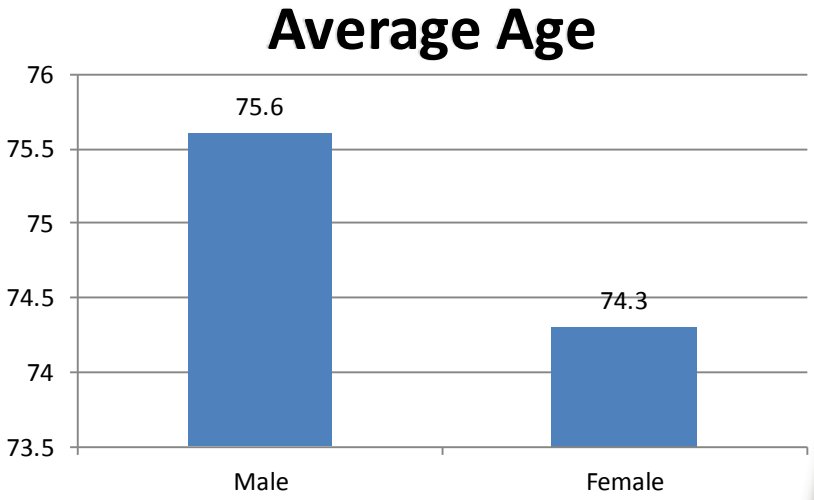
Fishers WeCare
Community Paramedicine

Current WeCare Data for HF and CP Patients



Fishers WeCare
Community Paramedicine

Current WeCare Data for HF and CP Patients

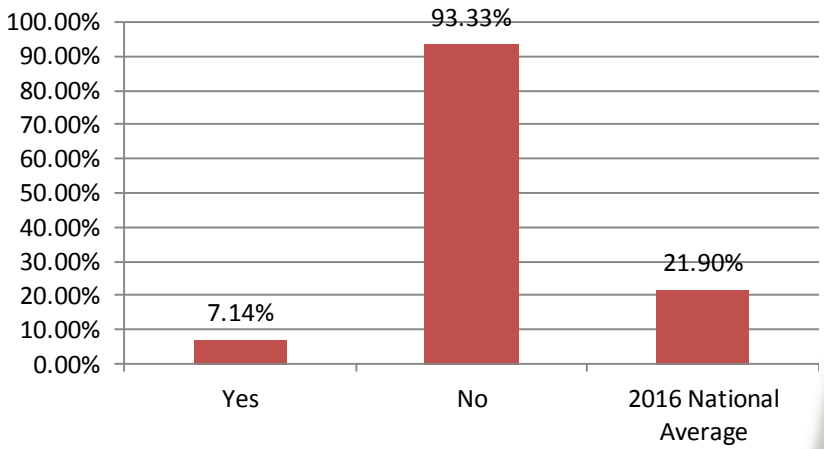


Fishers WeCare
Community Paramedicine

Current WeCare Data for HF and CP Patients

Admission Diagnosis	Percent of patients seen
Chronic Combined systolic and Diastolic HF	14.28%
Non ST elevated MI	7.14%
Stroke/Septic Shock	7.14%
COPD/sob	7.14%
Chronic A-fib/COPD	7.14%
Pneumonia	7.14%
Acute on Chronic HF	7.14%
Respiratory/SOB/HF	7.14%
HF	14.28%
HF/COPD	14.28%
Pul HTN/COPD/HF	7.14%

Current WeCare Data for HF and CP Patients



Fishers WeCare
Community Paramedicine

Reassessing Community Risk

Fishers WeCare
Community Paramedicine

Reassessing Community Risk

- Reassess every 5 years and/or if significant changes in policy or epidemic.
- Mental Health Initiative
  - http://www.fishers.in.us/mentalhealth


Questions?
Fishers WeCare
Community Paramedicine